

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/603,339
		Filing Date	June 24, 2003
		First Named Inventor	Jedrzejewski, Paul
		Art Unit	Unassigned
		Examiner Name	Unassigned
Total Number of Pages in This Submission		Attorney Docket Number	020144-001512US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP Patrick R. Jewik Reg. No. 40,456
Signature	
Date	11-14-03

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Sherbonné Barnes-Anderson		
Signature		Date	11/14/03



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

PATENT
Attorney Docket No.: 020144-001512US

Commissioner for Patents
Attn: Mail Stop Missing Parts
P.O. Box 1450
Alexandria, VA 22313-1450

On November 14, 2003

TOWNSEND and TOWNSEND and CREW LLP

By: Shirboni Barnea Odum

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Paul Jedrzejewski, et al.

Application No.: 10/603,339

Filed: June 24, 2003

For: MICROFLUIDIC DEVICES AND
METHODS

Examiner: Unassigned

Art Unit: Unassigned

TRANSMITTAL LETTER –
RESPONSE TO NOTICE TO FILE
CORRECTED APPLICATION PAPERS

November 14, 2003

Attn: Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to the Notice to File Corrected Application Papers, dated September 16, 2003, enclosed are the following to be made of record in the above-identified application:

- 1) Petition (with Exhibits A-C) Evidencing Deposit of Figure 29;
- 2) Twenty-five (25) sheets of formal (replacement) drawings; and
- 3) Copy of Notice to File Corrected Application Papers (Filing Date Granted).


11/20/2003 HLE333 00000002 201430 10603339

01 FC:1460 130.00 DA

Applicants believe they have now both (1) met the requirement to file formal (replacement) drawings, and (2) addressed the contention that Figure 29 was omitted. Applicants believe that this application is no longer informal and may be processed as a formal application. The U.S. Patent and Trademark Office is invited to telephone the attorney of record if any further issues remain (415.576.0200).

Applicants hereby authorize charging the petition fee of \$130.00, along with any additional fees believe to be due, to the Deposit Account No. 20-1430. The U.S. Patent and Trademark Office is respectfully requested to refund the petition fee in due course to Deposit Account No. 20-1430.

Respectfully submitted,



Patrick R. Jewik
Reg. No. 40,456

Customer No. 20350

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 415-576-0200
Fax: 415 576-0300
PRJ:sba



CONTINUATION PATENT APPLICATION
FILING ACKNOWLEDGMENT

Mailing Date: June 24, 2003 - Express Mail No.: EV330853972US
File No.: 020144-001512US Attorney: PRJ/lyk
Inventors: Jedrzejewski, Paul, et al.
Title: MICROFLUIDIC DEVICES AND METHODS
X Utility Patent Application Transmittal; X Fee Transmittal X2
X Application Data Sheet (ADS); X Preliminary Amendment
X Copy of Declaration as filed in the parent case
X Copy of application as filed in parent case

No. Pages of Description 39
No. Pages of Appendix 0
No. Pages of Claims: 7
No. Pages of Abstract: 1
25

17363 U.S. PTO
10/603339
06/24/03

Mailing Date: Jun
File No.: 0201
Inventors: Jed
Title: MICRO

X Utility Pat Transmittal; X Fee Transmittal X2
X Application Data Sheet (ADS); X Preliminary Amendment
X Copy of Declaration as filed in the parent case
X Copy of application as filed in parent case



EV 330853972 US



Customer Copy
Label 11-F June 2002

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)			
PO ZIP Code <u>94124</u>	Day of Delivery <input checked="" type="checkbox"/> Next <input checked="" type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>	
Date In <u>6/24/03</u>	<input checked="" type="checkbox"/> 11 Noon <input type="checkbox"/> 3 PM	Postage <u>13.65</u>	
Mo. Day Year	Military	Return Receipt Fee	
Time to <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	COD Fee Insurance Fee	
Weight <u>1.5</u> lbs. <u>0.25</u> ozs.	Int'l Alpha Country Code	Total Postage & Fees <u>13.65</u>	
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials <u>h</u>	Total Postage & Fees <u>13.65</u>	

DELIVERY (POSTAL USE ONLY)		
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional fee required for delivery to a location where a signature is required. If delivery to a location where a signature is required, the addressee or addressee's agent must sign the delivery receipt and authorize that delivery employee's signature.		
NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		

CUSTOMER USE ONLY
METHOD OF PAYMENT: X941836
Express Mail Corporate Acct. No.

Federal Agency Acct. No. or
Postal Service Acct. No.

FROM: (PLEASE PRINT) PHONE ()
TOWNSEND & TOWNSEND & CREW
2 EMBARCADERO CTR FL 8
SAN FRANCISCO CA 94111-3619

TO: (PLEASE PRINT) PHONE ()
MAIL STOP PATENT APPLICATION
COMMISSIONER FOR PATENTS
PO BOX 1450
ALEXANDRIA VA 22313-1450

PRESS HARD.
You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com



PRJ/lyk

020144-001512US